



June 23, 2006

DCN: C00-SAI-90499-01-10035

Mr. Tom Sayles
Regional Water Quality Control Board - Central Coast Region
895 Aerovista Place, Suite 101
San Luis Obispo, California 93401-7906

Re: **Well Destruction Report**
Chevron Service Station 9-0499
404 Soquel Avenue
Santa Cruz, California

Dear Mr. Sayles:

Science Applications International Corporation (SAIC) has prepared this report on behalf of Chevron Environmental Management Company (Chevron) to document the destruction of site ground water monitoring wells MW-3A, MW-7, MW-8, MW-9, MW-10, E-1 and E-2 (Figure 1). The wells were destroyed in order to complete site closure activities as directed by the California Regional Water Quality Control Board - Central Coast Region (RWQCB) in their letter to Chevron, dated May 10, 2006. The RWQCB requested the submittal of a well destruction report by June 15, 2006. Since field activities were being performed June 14 through June 16, 2006, SAIC requested a deadline extension on June 14, 2006 to submit the report to the RWQCB by June 23, 2006.

SCOPE OF WORK

Pre-Field Activities

SAIC obtained well destruction permits for monitoring wells MW-3A, MW-7, MW-8, MW-9, MW-10, E-1 and E-2 from the Santa Cruz County Health Services Agency (SCCHSA) and the City of Santa Cruz Water Department (SCWD) prior to commencing field activities (Attachment A). On behalf of Cascade Drilling, Inc. (Cascade Drilling) of Rancho Cordova, California, SAIC obtained a street opening permit from the City of Santa Cruz Public Works Department (Attachment B). SAIC prepared a site-specific health and safety plan, scheduled inspectors from the SCCHSA and SCWD, contacted Underground Service Alert at least 48 hours prior to drilling activities and subcontracted a private utility locator to identify subsurface obstructions.

Well Destruction Activities

SAIC understands that SCCHSA generally requests well drill out as the preferred well destruction method. However, SAIC requested that SCCHSA approve pressure grouting, should site conditions including physical obstructions and traffic safety preclude well drill out.

Prior to performing the well destruction activities, SAIC evaluated the site conditions for each well to determine if the well should be destroyed by pressure grouting or by over-drilling the well boring to total well depth. SAIC determined that wells MW-7, MW-9 and MW-10 could be drilled out; wells MW-3A, MW-8, E-1 and E-2 should be destroyed by using pressure grouting. The SCCHSA and SCWD inspectors observed and approved the well destruction methods during field activities.

Before drilling out wells MW-7, MW-9 and MW-10, all well boxes were removed and each well location was cleared to a depth of approximately 8 feet below ground surface (bgs), using an air knife rig to determine whether any subsurface utilities were located adjacent to each well. After clearing each well location, each well was destroyed by over-drilling the well casing and annular filter pack material to total well depth using a limited access hollow stem-auger rig equipped with 10-inch diameter hollow-stem augers. Wells MW-7 and MW-9 were over-drilled to a total depth of approximately 14 feet bgs, and Well MW-10 was over-drilled to a total depth of 21 feet bgs. The well borings were then backfilled to surface grade with neat cement grout.

SAIC destroyed wells MW-3A and MW-8 by pressure grouting, due to potentially significant health and safety hazards in the field. Well MW-3A was located within 1-foot of an underground electrical conduit that was installed after the original well construction. The location of Well MW-8, at the intersection of Ocean Street and Soquel Avenue, did not allow enough room to safely delineate an exclusion zone for over-drilling. SAIC pressure grouted wells E-1 and E-2 based on the original well construction details. Wells E-1 and E-2 were 6-inch diameter wells that were each installed in 20-inch diameter borings. The limited access drill rig that was booked for the well destruction fieldwork activities did not have the capability to spin 18-inch diameter augers to over-drill wells E-1 and E-2, nor did Cascade Drilling have any augers larger than 18-inches in diameter for their standard hollow-stem auger drill rigs. The limited access drill rig was booked for the fieldwork activities because of overhead hazards in the location of wells MW-8 and MW-9.

To pressure grout wells MW-3A, MW-8, E-1 and E-2, neat cement grout was pumped into each well under pressure of 15 pounds per square inch (psi) with the casing sealed at the surface until refusal of the sealing material was reached. During the field activities, if the grout column dropped after applying 15 psi pressure to the well, additional grout was pumped into the well until the top of the grout column stabilized at the top of the well casing. At Well E-2, a 1½-inch diameter piezometer with a total depth of approximately 6 feet bgs was encountered adjacent to the well. This piezometer was grouted into place during the pressure grouting of Well E-2. The approximate amount of grout backfilled into each well casing is summarized below in Table A. The volume of grout slurry pumped into each well was between 2 and 3 volumes of the well casings, indicating that the grout slurry penetrated beyond the well casing and into the surrounding filter pack (Table A).

Table A. Summary of Monitoring Well Destructutions

Well ID	Casing Diameter (inches)	Borehole Diameter (inches)	Total Well Depth (feet)	Well Destruction Method	Volume of Well Casing* (gallons)	Approximate Volume of Grout Backfilled into Boring (gallons)
MW-3A	4	10	20	Pressure grout	13.2	57
MW-7	4	10	12.5	Over-drill to 14 feet bgs	--	40
MW-8	4	10	13.5	Pressure grout	8.91	21
MW-9	4	10	13	Over-drill to 14 feet bgs	--	40
MW-10	4	10	19	Over-drill to 21 feet bgs	--	75
E-1	6	20	16.5	Pressure grout	24.75	50
E-2	6	20	16	Pressure grout	24	57
*Volume of well casing is determined by multiplying well depth with the Volume Gallon per Linear Foot conversion factor for each respective well diameter. For a 4-inch diameter well, the Volume Gallon per Linear Foot conversion factor is 0.66, for a 6-inch diameter well, the Volume Gallon per Linear Foot conversion factor is 1.50.						

Upon completion of well destruction activities, the surfaces of destroyed wells MW-3A, MW-10 and E-2 were restored with concrete; and the surfaces of destroyed wells MW-7, MW-8 and MW-9 were temporarily restored with a cold-patch asphalt seal. The cold-patch asphalt seal in the locations of destroyed wells MW-7, MW-8 and MW-9 will subsequently be replaced with hot-patch asphalt seal in accordance with the City of Santa Cruz requirements. In the location of destroyed Well E-1 in the landscaped area, the surface was restored with top soil.

The soil and water waste generated from the well destruction activities was stored onsite in eleven 55-gallon drums. Waste composite samples were collected from the soil drums and submitted for chemical analyses to a California state-certified analytical laboratory to characterize the soil for disposal. Upon receipt of the laboratory analytical results, SAIC will make arrangements to have the waste removed from the site by IWM, Inc., of Milpitas, California.

CONCLUSION

Based on the results of the well destruction activities, the wells were properly destroyed in accordance with the requirements of the State of California Well Standards Bulletin 74-81, Chapter II, Part III, Section 13 and the local requirements of the SCCHSA.

CLOSING


Should you have any questions or comments regarding the contents of this report, please contact Dana McCarthy of SAIC at (408) 356-0200 ext.15.

Sincerely,

SCIENCE APPLICATIONS INTERNATIONAL CORPORATION



DANA MCCARTHY
Project Manager



JOSEPH MUZZIO
Program Manager
C.E.G. 1672

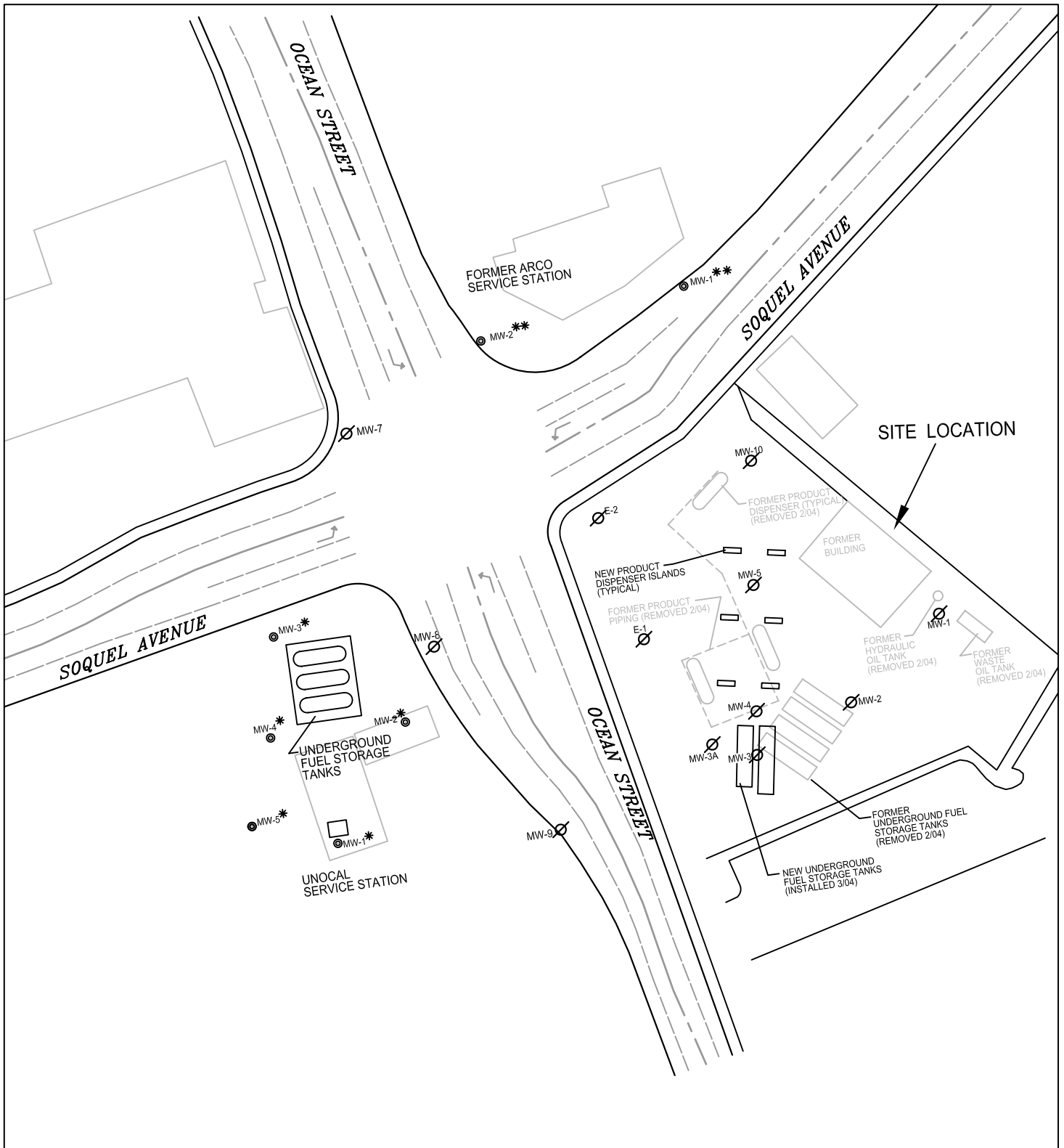


Enclosures: Figure 1 – Extended Site Map

Attachment A – Well Destruction Permits

Attachment B – City of Santa Cruz Street Opening Permit

cc: Mr. Mark Lafferty, Chevron Environmental Management Company, P.O Box 6012,
San Ramon, CA 94583-0904
Mr. Rolando Charles, Santa Cruz County Department of Environmental Health, 701 Ocean
Street, Room 312, Santa Cruz, CA 95060
SAIC Document Control File
State of California Geotracker Database



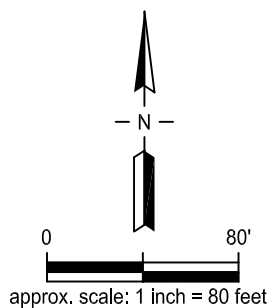
LEGEND

- DESTROYED WELL (see NOTES below)
- MONITORING WELL (ARCO)
- MONITORING WELL (UNOCAL)
- DISPENSER PIPING

NOTE:

MW-1, MW-2, and MW-4 Destroyed in April 1991.
 MW-3 and MW-5 Destroyed in December 2003.
 MW-3A, MW-7, MW-8, MW-9, MW-10, E-1 and E-2 Destroyed in June 2006.

Basemap Modified from Geoconsultants, Inc.



EXTENDED SITE MAP

Chevron Station 9-0499

404 Soquel Avenue, Santa Cruz, California

Drawn	VJH	Checked	DKM	Approved	Figure
Date	06/21/06	Date	06/21/06	Date	1
Job no.	06-6102-00-8832-190			File no.	

SAIC Science Applications
 From Science to Solutions™ International Corporation

ATTACHMENT A
WELL DESTRUCTION PERMITS



APPLICATION FOR WELL PERMIT
CITY OF SANTA CRUZ - WATER DEPARTMENT
809 CENTER STREET, ROOM 102 SANTA CRUZ, CA 95060 (831) 420-5210

010-051-46
ASSESSOR'S PARCEL NUMBER

2006-8
PERMIT NUMBER

E-1, E-2, MW-3A, MW-7 to MW-10
(SEVEN WELLS)

IMPORTANT: READ ALL INFORMATION ON BACK OF APPLICATION.

SITE ADDRESS: 404 Soquel Ave., Santa Cruz

OWNER: Chevron-Mark Lafferty ADDRESS: P.O. Box 6012, San Ramon 94583 PHONE: (925)842-8953

IS SITE SERVED BY A CITY WATER CONNECTION? ☒ YES ☐ NO

DRILLING CONTRACTOR: Cascade Drilling LICENSE # 717510 PHONE: (916)638-1169

DIRECTIONS TO SITE: located at the SE corner of the intersection of Ocean St. and Soquel Ave.

NEW CONSTRUCTION ☐ REPAIR/RECONSTRUCTION ☐ DESTRUCTION ☒
INTENDED USE DOMESTIC ☐ PUBLIC ☐ IRRIGATION ☐ COMMERCIAL/INDUSTRIAL ☐ MONITORING ☒ CATHODIC PROTECTION ☐

FLOW METER REQUIRED ☐ YES ☒ NO

DISTANCE FROM WELL SITE TO NEAREST

WELL ☒ LEACH FIELD ☒ SEPTIC SYSTEM (CESSPOOL/PIT) ☒ SEWER (MAIN/SEPTIC TANK) ☒ PROPERTY LINE ☒

EXISTING WELLS ON PROPERTY (NUMBER AND INTENDED USE)

DOMESTIC: _____
IRRIGATION: _____
COMMERCIAL: _____
OTHER: All seven monitoring wells onsite to be destroyed

WELL CONSTRUCTION (INCLUDE WELL DRAWING WITH APPLICATION)

TOTAL DEPTH (ft.) _____ DIAMETER (in.) _____ DEPTH OF SEAL (ft.) _____ THICKNESS OF SEAL (in.) _____

WELL DESTRUCTION

DEPTH OF WELL 12-20 DEPTH OF SEAL 5 NUMBER OF WATER FORMATIONS PENETRATED 1

CLEANING OF WELL REQUIRED? ☐ YES ☒ NO SEALING MATERIAL neat cement

PLOT PLAN

INCLUDE A COPY OF THE PLOT PLAN SHOWING, WHEN APPLICABLE, ALL OF THE FOLLOWING:

- OWNER'S NAME, ADDRESS AND ASSESSOR'S PARCEL NUMBER
- SCALE OF DRAWING OR DIMENSIONS, NORTH ARROW, PROPERTY LINES
- DIRECTIONAL SLOPE OF GROUND INDICATED BY ARROW(S)
- LOCATION OF THE FOLLOWING
 - DWELLING(S)/STRUCTURE(S) ON PROPERTY
 - PROPOSED WELL
 - EXISTING WELL(S) WITHIN 500 FEET
 - EXISTING OR PROPOSED SUBSURFACE SEWAGE LEACHING FIELDS WITHIN 100 FEET OF PROPOSED WELL SITE
 - EXISTING OR PROPOSED CESSPOOLS OR SEEPAGE PITS WITHIN 150 FEET OF THE PROPOSED WELL SITE
 - SEWER MAINS, LATERALS OR SEPTIC TANKS WITHIN 50 FEET OF THE PROPOSED WELL SITE
 - CREEKS OR STREAMS ON PROPERTY

I HEREBY AGREE TO COMPLY WITH ALL LAWS AND REGULATIONS OF THE CITY OF SANTA CRUZ MUNICIPAL CODE CHAPTER 16.06, THE CALIFORNIA DEPARTMENT OF WATER RESOURCES WELL STANDARDS (BULLETINS 74-81 & 74-90) AND THE CALIFORNIA WATER CODE PERTAINING TO WELL CONSTRUCTION. I DECLARE UNDER PENALTY OF PERJURY THAT THE INFORMATION SUBMITTED ON THIS APPLICATION IS TRUE AND CORRECT. I UNDERSTAND THAT THIS PERMIT EXPIRES ONE YEAR FROM ISSUANCE.

SIGNATURE OF APPLICANT: [Signature] DATE: 6/5/06

FOR OFFICE USE ONLY

APPROVED BY: [Signature] ASSISTANT ENGINEER 6/12/06

COMMENTS: SEVEN WELLS TO BE DESTROYED

WELL PERMIT FEE: 6/12/06 \$505 8339

INSPECTIONS (SIGNATURE, DATE, COMMENTS)

INITIAL SITE INSPECTION: _____

INSPECTION OF ANNULAR SEAL: _____

FINAL INSPECTION: _____

ADDITIONAL COMMENTS: _____

RECEIPT OF WELL LOG (DATE): _____

APPLICATION FOR WELL PERMIT

☐ NEW ☐ REPLACEMENT ☐ SUPPLEMENTAL ☒ DESTRUCTION ☐ OTHER _____ ☐ MONITORING WELL

===== **MW-3A** =====
 010-051-46 27,968 sq ft 010-098 2381
 (ASSESSOR'S PARCEL NUMBER) (PARCEL SIZE) (PERMIT #) (ENVISION #) PROGRAM ELEMENT
 SITE ADDRESS 404 Soquel Avenue, Santa Cruz CA 95060
 OWNER Chevron-Mark Lafferty ADDRESS P.O. Box 6012, San Ramon, CA 94583
 DRILLING CONTRACTOR Cascade Drilling LICENSE # 717510 PHONE (916) 638-1169
 DIRECTIONS TO SITE SE corner Soquel Avenue & Ocean St., Santa Cruz CA 95060

DESIGN SPECIFICATIONS:

CASH REGISTER VALIDATION

INTENDED USE

DOMESTIC: _____

#Homes Served _____

WATER SYSTEM WELL: _____

Name of Water System _____

IRRIGATION _____

COMMERCIAL/INDUSTRIAL _____

MONITORING: _____

GRDWTR _____ VADOSE _____

OTHER: _____ (SPECIFY)

WITHIN WATER DISTRICT SERVICE AREA _____ NO _____ YES NAME: _____

(FORM HSA-579-REQUIRED)

CONSTRUCTION

DEPTH (FT.) _____

DIAMETER (IN.) _____

DEPTH OF SEAL (FT.) _____

WIDTH OF SEAL (IN.) _____

EXISTING WELLS ON PROPERTY:

1. OTHER WELLS ON PROPERTY: NUMBER: _____ TYPES: DOMESTIC _____ IRRIGATION _____ COMMERCIAL USE _____ OTHER _____

2. CONDITION OF OTHER WELLS ON PROPERTY: IN USE _____ TO BE DESTROYED _____

3. IF NEW WELL REPLACES AN EXISTING WELL, INDICATE INTENTIONS FOR USE OF REPLACED WELL:

_____ TO SUPPLEMENT NEW WELL _____ TO BE DESTROYED _____ OTHER _____

WELL DESTRUCTION:

DEPTH OF WELL 20 DEPTH OF SEAL: 5 NUMBER OF WATER FORMATIONS PENETRATED 1

CLEANING OF WELL REQUIRED YES: _____ NO: X SEALING MATERIAL _____

PLOT PLAN: ATTACH 2 COPIES OF PLOT PLAN (SEE REVERSE FOR REQUIREMENTS)

I HEREBY AGREE TO COMPLY WITH ALL LAWS AND REGULATIONS OF THE COUNTY OF SANTA CRUZ AND STATE OF CALIFORNIA PERTAINING TO WELL CONSTRUCTION, AND DECLARE UNDER PENALTY OF PERJURY THE INFORMATION SUBMITTED ON THIS APPLICATION IS TRUE AND CORRECT. I WILL CONTACT THE ENVIRONMENTAL HEALTH SERVICE WHEN I COMMENCE THE WORK. WITHIN 15 DAYS AFTER COMPLETION OF WORK I WILL FURNISH THE ENVIRONMENTAL HEALTH SERVICE A REPORT OF THE WORK PERFORMED AND NOTIFY THEM BEFORE PUTTING THE WELL INTO USE. I UNDERSTAND THAT THIS PERMIT EXPIRES ONE YEAR FROM DATE OF ISSUANCE. I UNDERSTAND APPROVAL OF THE WELL PERMIT DOES NOT INDICATE WHETHER THIS PROPERTY IS SUITABLE FOR AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM OR THAT A PERMIT TO INSTALL SUCH SYSTEM WILL BE GRANTED.

WORKER'S COMPENSATION CERTIFICATE

A CURRENTLY EFFECTIVE CERTIFICATION OF WORKERS COMPENSATION INSURANCE IS ON FILE WITH THIS OFFICE.

INSURANCE CARRIER Insurance Co. of the State of Pennsylvania POLICY # WC 4787870

I CERTIFY THAT IN THE PERFORMANCE OF THE WORK FOR WHICH THIS PERMIT IS ISSUED I SHALL NOT EMPLOY ANY PERSON IN ANY MANNER SO AS TO BECOME SUBJECT TO THE WORKER'S COMPENSATION LAWS OF CALIFORNIA

PROPERTY OWNER [Signature]DRILLING CONTRACTOR [Signature]

5/26/05

FOR OFFICE USE ONLY:ENVIRONMENTAL ASSESSMENT REQUIRED YES _____ NO ☒METER REQUIRED YES _____ NO ☒

METER INSTALLED _____

DATE _____

READING _____

SITE INSPECTION 6/13/05

DATE

EHS SPECIALIST [Signature]

ANNULAR WELL SEAL WITNESSED:

APPLICATION APPROVAL 6/13/05

YES DATE _____

PAD INSPECTION _____

NO DEPTH _____

RECEIPT OF WELL LOG _____

SEAL MATERIAL _____

FINAL _____

SACKS CEMENT/YARD _____

COMMENTS: _____

DISTRIBUTION: WHITE - EHS /YELLOW - WELL DRILLER /PINK - FISCAL CONTROL /GOLDENROD - RECEIPT

Well Permit Application - PHD-133.WPD (REV. 9/03)

APPLICATION FOR WELL PERMIT

☐ NEW ☐ REPLACEMENT ☐ SUPPLEMENTAL ☒ DESTRUCTION ☐ OTHER _____ ☐ MONITORING WELL

010-051-46 (MW-7 located in city right of way on Ocean St) (ASSESSOR'S PARCEL NUMBER) 010-101 (PARCEL SIZE) 2381 (PERMIT #) (ENVISION #) PROGRAM ELEMENT
 SITE ADDRESS 404 Soquel Ave. Santa Cruz (MW-7 located at NW corner of Soquel Ave. and Ocean St intersection)
 OWNER Chevron- Mark Lafferty ADDRESS P.O. Box 6012, San Ramon, CA 94583
 DRILLING CONTRACTOR Cascade Drilling LICENSE # 717510 PHONE (916) 638-1169
 DIRECTIONS TO SITE MW-7 located at NW corner of Soquel Ave. and Ocean St intersection
Chevron site is located at SE corner of intersection

DESIGN SPECIFICATIONS:**CASH REGISTER VALIDATION****INTENDED USE**

DOMESTIC: _____

#Homes Served _____

WATER SYSTEM WELL: _____

Name of Water System _____

IRRIGATION _____

COMMERCIAL/INDUSTRIAL _____

MONITORING: _____

GROWTR VADOSE _____

OTHER: _____ (SPECIFY)

WITHIN WATER DISTRICT SERVICE AREA _____ NO _____ YES NAME: _____ (FORM HSA-579-REQUIRED)

CONSTRUCTION DEPTH (FT.) _____ DIAMETER (IN.) _____ DEPTH OF SEAL (FT.) _____ WIDTH OF SEAL (IN.) _____**EXISTING WELLS ON PROPERTY:**

1. OTHER WELLS ON PROPERTY: NUMBER: _____ TYPES: DOMESTIC _____ IRRIGATION _____ COMMERCIAL USE _____ OTHER _____
2. CONDITION OF OTHER WELLS ON PROPERTY: IN USE _____ TO BE DESTROYED _____
3. IF NEW WELL REPLACES AN EXISTING WELL, INDICATE INTENTIONS FOR USE OF REPLACED WELL:
 _____ TO SUPPLEMENT NEW WELL _____ TO BE DESTROYED _____ OTHER _____

WELL DESTRUCTION:
 DEPTH OF WELL 12 DEPTH OF SEAL: _____ NUMBER OF WATER FORMATIONS PENETRATED 1
 CLEANING OF WELL REQUIRED YES: _____ NO: _____ SEALING MATERIAL _____
PLOT PLAN: ATTACH 2 COPIES OF PLOT PLAN (SEE REVERSE FOR REQUIREMENTS)

I HEREBY AGREE TO COMPLY WITH ALL LAWS AND REGULATIONS OF THE COUNTY OF SANTA CRUZ AND STATE OF CALIFORNIA PERTAINING TO WELL CONSTRUCTION, AND DECLARE UNDER PENALTY OF PERJURY THE INFORMATION SUBMITTED ON THIS APPLICATION IS TRUE AND CORRECT. I WILL CONTACT THE ENVIRONMENTAL HEALTH SERVICE WHEN I COMMENCE THE WORK. WITHIN 15 DAYS AFTER COMPLETION OF WORK I WILL FURNISH THE ENVIRONMENTAL HEALTH SERVICE A REPORT OF THE WORK PERFORMED AND NOTIFY THEM BEFORE PUTTING THE WELL INTO USE. I UNDERSTAND THAT THIS PERMIT EXPIRES ONE YEAR FROM DATE OF ISSUANCE. I UNDERSTAND APPROVAL OF THE WELL PERMIT DOES NOT INDICATE WHETHER THIS PROPERTY IS SUITABLE FOR AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM OR THAT A PERMIT TO INSTALL SUCH SYSTEM WILL BE GRANTED.

WORKER'S COMPENSATION CERTIFICATE

A CURRENTLY EFFECTIVE CERTIFICATION OF WORKERS COMPENSATION INSURANCE IS ON FILE WITH THIS OFFICE.

INSURANCE CARRIER Insurance Co of State of Pennsylvania POLICY # WC 4787970

I CERTIFY THAT IN THE PERFORMANCE OF THE WORK FOR WHICH THIS PERMIT IS ISSUED I SHALL NOT EMPLOY ANY PERSON IN ANY MANNER SO AS TO BECOME SUBJECT TO THE WORKER'S COMPENSATION LAWS OF CALIFORNIA

PROPERTY OWNER [Signature]DRILLING CONTRACTOR [Signature]5/13/06**FOR OFFICE USE ONLY:**

ENVIRONMENTAL ASSESSMENT REQUIRED YES _____ NO _____

METER REQUIRED YES _____ NO ✓

METER INSTALLED _____

DATE _____

READING _____

SITE INSPECTION 6/13/06APPLICATION APPROVAL 6/13/06

PAD INSPECTION _____

RECEIPT OF WELL LOG _____

FINAL _____

DATE

EHS SPECIALIST

ANNULAR WELL SEAL WITNESSED:

YES DATE _____

NO DEPTH _____

SEAL MATERIAL _____

SACKS CEMENT/YARD _____

COMMENTS: _____

DISTRIBUTION: WHITE - EHS /YELLOW - WELL DRILLER /PINK - FISCAL CONTROL /GOLDENROD - RECEIPT

Well Permit Application - PHD-133.WPD (REV. 9/03)

APPLICATION FOR WELL PERMIT
☐ NEW ☐ REPLACEMENT ☐ SUPPLEMENTAL ☒ DESTRUCTION ☐ OTHER _____ ☐ MONITORING WELL

MW-8

010-051-46 (MW-8 located in city right-of-way on Ocean St) 00-102 2381
 (ASSESSOR'S PARCEL NUMBER) (PARCEL SIZE) (PERMIT #) (ENVISION #) PROGRAM ELEMENT
 SITE ADDRESS 404 Soquel Ave. Santa Cruz (MW-8 located at SW corner of Soquel Ave. and Ocean St. intersection)
 OWNER Chevron - Mark Lafferty ADDRESS P.O. Box 6012, San Ramon CA 94583
 DRILLING CONTRACTOR Cascade Drilling LICENSE # 717510 PHONE (916) 638-1169
 DIRECTIONS TO SITE MW-8 at SW corner of Soquel and Ocean St. intersection
 Chevron Site located at SE corner of intersection

DESIGN SPECIFICATIONS:

06/09/02 CASH REGISTER VALIDATION 0008

INTENDED USE

DOMESTIC: _____

#Homes Served _____

WATER SYSTEM WELL: _____

Name of Water System _____

IRRIGATION _____

COMMERCIAL/INDUSTRIAL _____

MONITORING: _____

GROWTH VADOSE _____

OTHER: _____ (SPECIFY)

WITHIN WATER DISTRICT SERVICE AREA _____ NO _____ YES NAME: _____ (FORM HSA-579-REQUIRED)

CONSTRUCTION DEPTH (FT.) _____ DIAMETER (IN.) _____ DEPTH OF SEAL (FT.) _____ WIDTH OF SEAL (IN.) _____**EXISTING WELLS ON PROPERTY:**

1. OTHER WELLS ON PROPERTY: NUMBER: _____ TYPES: DOMESTIC _____ IRRIGATION _____ COMMERCIAL USE _____ OTHER _____
2. CONDITION OF OTHER WELLS ON PROPERTY: IN USE _____ TO BE DESTROYED _____
3. IF NEW WELL REPLACES AN EXISTING WELL, INDICATE INTENTIONS FOR USE OF REPLACED WELL:
 _____ TO SUPPLEMENT NEW WELL _____ TO BE DESTROYED _____ OTHER _____

WELL DESTRUCTION:
 DEPTH OF WELL 13.5 DEPTH OF SEAL: _____ NUMBER OF WATER FORMATIONS PENETRATED 1
 CLEANING OF WELL REQUIRED YES: _____ NO: _____ SEALING MATERIAL _____
PLOT PLAN: ATTACH 2 COPIES OF PLOT PLAN (SEE REVERSE FOR REQUIREMENTS)

I HEREBY AGREE TO COMPLY WITH ALL LAWS AND REGULATIONS OF THE COUNTY OF SANTA CRUZ AND STATE OF CALIFORNIA PERTAINING TO WELL CONSTRUCTION, AND DECLARE UNDER PENALTY OF PERJURY THE INFORMATION SUBMITTED ON THIS APPLICATION IS TRUE AND CORRECT. I WILL CONTACT THE ENVIRONMENTAL HEALTH SERVICE WHEN I COMMENCE THE WORK. WITHIN 15 DAYS AFTER COMPLETION OF WORK I WILL FURNISH THE ENVIRONMENTAL HEALTH SERVICE A REPORT OF THE WORK PERFORMED AND NOTIFY THEM BEFORE PUTTING THE WELL INTO USE. I UNDERSTAND THAT THIS PERMIT EXPIRES ONE YEAR FROM DATE OF ISSUANCE. I UNDERSTAND APPROVAL OF THE WELL PERMIT DOES NOT INDICATE WHETHER THIS PROPERTY IS SUITABLE FOR AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM OR THAT A PERMIT TO INSTALL SUCH SYSTEM WILL BE GRANTED.

WORKER'S COMPENSATION CERTIFICATE
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 INSURANCE CARRIER Insurance Co. of State of Pennsylvania POLICY # WC 4787870

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PROPERTY OWNER _____

DRILLING CONTRACTOR _____

FOR OFFICE USE ONLY:ENVIRONMENTAL ASSESSMENT REQUIRED YES _____ NO ☒METER REQUIRED YES _____ NO ☒

METER INSTALLED _____

DATE _____

READING _____

SITE INSPECTION _____

APPLICATION APPROVAL _____

PAD INSPECTION _____

RECEIPT OF WELL LOG _____

FINAL _____

DATE

EHS SPECIALIST

ANNULAR WELL SEAL WITNESSED:

YES DATE _____

NO DEPTH _____

SEAL MATERIAL _____

SACKS CEMENT/YARD _____

COMMENTS: _____

DISTRIBUTION: WHITE - EHS /YELLOW - WELL DRILLER /PINK - FISCAL CONTROL /GOLDENROD - RECEIPT

Well Permit Application - PHD-133.WPD (REV. 9/03)

APPLICATION FOR WELL PERMIT

☐ NEW ☐ REPLACEMENT ☐ SUPPLEMENTAL ☒ DESTRUCTION ☐ OTHER ☐ MONITORING WELL

MW-9
 010-051-46 (ASSESSOR'S PARCEL NUMBER) right of way on Ocean St (PARCEL SIZE) 010-103 (PERMIT #) 2381 (ENVISION #) PROGRAM ELEMENT
 SITE ADDRESS 404 Soquel Ave. Santa Cruz (MW-9 at SW corner of Soquel and Ocean St intersection)
 OWNER Chevron-Mark Lafferty ADDRESS P.O. Box 6012, San Ramon 94503
 DRILLING CONTRACTOR Cascade Drilling LICENSE # 717510 PHONE (916) 638-1169
 DIRECTIONS TO SITE MW-9 located ~ 180 ft South of Soquel and Ocean St intersection on SW corner.
Chevron Site located at SE corner of intersection

DESIGN SPECIFICATIONS:**INTENDED USE**DOMESTIC: ☐#Homes Served WATER SYSTEM WELL: ☐Name of Water System IRRIGATION ☐COMMERCIAL/INDUSTRIAL ☐MONITORING: ☐GRDWTR ☐ VADOSE ☐OTHER: (SPECIFY)WITHIN WATER DISTRICT SERVICE AREA ☐ NO ☐ YES NAME: (FORM HSA-579-REQUIRED)**CONSTRUCTION** DEPTH (FT.) DIAMETER (IN.) DEPTH OF SEAL (FT.) WIDTH OF SEAL (IN.) **EXISTING WELLS ON PROPERTY:**

1. OTHER WELLS ON PROPERTY: NUMBER: TYPES: DOMESTIC ☐ IRRIGATION ☐ COMMERCIAL USE ☐ OTHER ☐
2. CONDITION OF OTHER WELLS ON PROPERTY: IN USE ☐ TO BE DESTROYED ☐
3. IF NEW WELL REPLACES AN EXISTING WELL, INDICATE INTENTIONS FOR USE OF REPLACED WELL:
☐ TO SUPPLEMENT NEW WELL ☐ TO BE DESTROYED ☐ OTHER

WELL DESTRUCTION:
 DEPTH OF WELL 13 DEPTH OF SEAL: NUMBER OF WATER FORMATIONS PENETRATED 1
 CLEANING OF WELL REQUIRED YES: ☐ NO: ☐ SEALING MATERIAL
PLOT PLAN: ATTACH 2 COPIES OF PLOT PLAN (SEE REVERSE FOR REQUIREMENTS)

I HEREBY AGREE TO COMPLY WITH ALL LAWS AND REGULATIONS OF THE COUNTY OF SANTA CRUZ AND STATE OF CALIFORNIA PERTAINING TO WELL CONSTRUCTION, AND DECLARE UNDER PENALTY OF PERJURY THE INFORMATION SUBMITTED ON THIS APPLICATION IS TRUE AND CORRECT. I WILL CONTACT THE ENVIRONMENTAL HEALTH SERVICE WHEN I COMMENCE THE WORK. WITHIN 15 DAYS AFTER COMPLETION OF WORK I WILL FURNISH THE ENVIRONMENTAL HEALTH SERVICE A REPORT OF THE WORK PERFORMED AND NOTIFY THEM BEFORE PUTTING THE WELL INTO USE. I UNDERSTAND THAT THIS PERMIT EXPIRES ONE YEAR FROM DATE OF ISSUANCE. I UNDERSTAND APPROVAL OF THE WELL PERMIT DOES NOT INDICATE WHETHER THIS PROPERTY IS SUITABLE FOR AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM OR THAT A PERMIT TO INSTALL SUCH SYSTEM WILL BE GRANTED.

WORKER'S COMPENSATION CERTIFICATE

A CURRENTLY EFFECTIVE CERTIFICATION OF WORKERS COMPENSATION INSURANCE IS ON FILE WITH THIS OFFICE.

INSURANCE CARRIER Insurance Co. of State of Pennsylvania POLICY # WC 4787870

I CERTIFY THAT IN THE PERFORMANCE OF THE WORK FOR WHICH THIS PERMIT IS ISSUED I SHALL NOT EMPLOY ANY PERSON IN ANY MANNER SO AS TO BECOME SUBJECT TO THE WORKER'S COMPENSATION LAWS OF CALIFORNIA

PROPERTY OWNER DRILLING CONTRACTOR 5/26/06**FOR OFFICE USE ONLY:**ENVIRONMENTAL ASSESSMENT REQUIRED YES ☐ NO ☒METER REQUIRED YES ☐ NO ☒METER INSTALLED DATE READING SITE INSPECTION 6/13/06DATE 6/13/06EHS SPECIALIST

ANNULAR WELL SEAL WITNESSED:

APPLICATION APPROVAL 6/13/06PAD INSPECTION RECEIPT OF WELL LOG FINAL YES DATE NO DEPTH SEAL MATERIAL # SACKS CEMENT/YARD COMMENTS:

DISTRIBUTION: WHITE - EHS /YELLOW - WELL DRILLER /PINK - FISCAL CONTROL /GOLDENROD - RECEIPT

Well Permit Application - PHD-133.WPD (REV. 9/03)

APPLICATION FOR WELL PERMIT

☐ NEW ☐ REPLACEMENT ☐ SUPPLEMENTAL ☒ DESTRUCTION ☐ OTHER _____ ☐ MONITORING WELL

MW-10

010-051-46 (ASSESSOR'S PARCEL NUMBER) 27,968 sq. ft. (PARCEL SIZE) 010-104 (PERMIT #) 2381 (ENVISION #) PROGRAM ELEMENT
 SITE ADDRESS 404 Soquel Avenue, Santa Cruz, CA 95060
 OWNER Chevron-Mark Lafferty ADDRESS P.O. Box 6012, San Ramon CA 94583
 DRILLING CONTRACTOR Cascade Drilling LICENSE # 717510 PHONE (916) 638-1169
 DIRECTIONS TO SITE SE corner of Soquel Ave. and Ocean St. Santa Cruz, CA 95060

DESIGN SPECIFICATIONS:**INTENDED USE**

DOMESTIC: _____

#Homes Served _____

WATER SYSTEM WELL: _____

Name of Water System _____

IRRIGATION _____

COMMERCIAL/INDUSTRIAL _____

MONITORING: _____

GRDWTR _____ VADOSE _____

OTHER: _____ (SPECIFY)

WITHIN WATER DISTRICT SERVICE AREA _____ NO _____ YES NAME: _____ (FORM HSA-579-REQUIRED)

CONSTRUCTION DEPTH (FT.) _____ DIAMETER (IN.) _____ DEPTH OF SEAL (FT.) _____ WIDTH OF SEAL (IN.) _____**EXISTING WELLS ON PROPERTY:**

1. OTHER WELLS ON PROPERTY: NUMBER: _____ TYPES: DOMESTIC _____ IRRIGATION _____ COMMERCIAL USE _____ OTHER _____
 2. CONDITION OF OTHER WELLS ON PROPERTY: IN USE _____ TO BE DESTROYED _____
 3. IF NEW WELL REPLACES AN EXISTING WELL, INDICATE INTENTIONS FOR USE OF REPLACED WELL:
 _____ TO SUPPLEMENT NEW WELL _____ TO BE DESTROYED _____ OTHER _____

WELL DESTRUCTION:

DEPTH OF WELL 19 DEPTH OF SEAL: _____ NUMBER OF WATER FORMATIONS PENETRATED 1
 CLEANING OF WELL REQUIRED YES: _____ NO: _____ SEALING MATERIAL _____

PLOT PLAN: ATTACH 2 COPIES OF PLOT PLAN (SEE REVERSE FOR REQUIREMENTS)

I HEREBY AGREE TO COMPLY WITH ALL LAWS AND REGULATIONS OF THE COUNTY OF SANTA CRUZ AND STATE OF CALIFORNIA PERTAINING TO WELL CONSTRUCTION, AND DECLARE UNDER PENALTY OF PERJURY THE INFORMATION SUBMITTED ON THIS APPLICATION IS TRUE AND CORRECT. I WILL CONTACT THE ENVIRONMENTAL HEALTH SERVICE WHEN I COMMENCE THE WORK. WITHIN 15 DAYS AFTER COMPLETION OF WORK I WILL FURNISH THE ENVIRONMENTAL HEALTH SERVICE A REPORT OF THE WORK PERFORMED AND NOTIFY THEM BEFORE PUTTING THE WELL INTO USE. I UNDERSTAND THAT THIS PERMIT EXPIRES ONE YEAR FROM DATE OF ISSUANCE. I UNDERSTAND APPROVAL OF THE WELL PERMIT DOES NOT INDICATE WHETHER THIS PROPERTY IS SUITABLE FOR AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM OR THAT A PERMIT TO INSTALL SUCH SYSTEM WILL BE GRANTED.

WORKER'S COMPENSATION CERTIFICATE

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 INSURANCE CARRIER Insurance Co. of State of Pennsylvania POLICY # WC 478 7870

I CERTIFY THAT IN THE PERFORMANCE OF THE WORK FOR WHICH THIS PERMIT IS ISSUED I SHALL NOT EMPLOY ANY PERSON IN ANY MANNER SO AS TO BECOME SUBJECT TO THE WORKER'S COMPENSATION LAWS OF CALIFORNIA

PROPERTY OWNER [Signature] DRILLING CONTRACTOR [Signature] 5/26/06

FOR OFFICE USE ONLY:ENVIRONMENTAL ASSESSMENT REQUIRED YES _____ NO ☒METER REQUIRED YES _____ NO ☒ METER INSTALLED _____ DATE _____ READING _____

DATE _____ EHS SPECIALIST _____ ANNULAR WELL SEAL WITNESSED: _____

SITE INSPECTION 6/13/06 [Signature] _____ YES DATE _____
 APPLICATION APPROVAL 6/13/06 [Signature] _____ NO DEPTH _____

PAD INSPECTION _____ SEAL MATERIAL _____
 RECEIPT OF WELL LOG _____ # SACKS CEMENT/YARD _____

FINAL _____

COMMENTS: _____

DISTRIBUTION: WHITE - EHS /YELLOW - WELL DRILLER /PINK - FISCAL CONTROL /GOLDENROD - RECEIPT

Well Permit Application - PHD-133.WPD (REV. 9/03)

APPLICATION FOR WELL PERMIT
☐ NEW ☐ REPLACEMENT ☐ SUPPLEMENTAL ☒ DESTRUCTION ☐ OTHER _____ ☐ MONITORING WELL

E-1

010-051-446 (ASSESSOR'S PARCEL NUMBER) 27,968 sq. ft. (PARCEL SIZE) 06099 (PERMIT #) 2381 (ENVISION #) PROGRAM ELEMENT

SITE ADDRESS 404 Soquel Avenue, Santa Cruz, CA 95060

OWNER Chevron - Mark Lafferty ADDRESS P.O. Box 6012, San Ramon, CA 94583

DRILLING CONTRACTOR Cascade Drilling LICENSE # 717510 PHONE (916) 638-1169

DIRECTIONS TO SITE SE corner of Soquel Ave and Ocean St. Santa Cruz, CA 95060

DESIGN SPECIFICATIONS:**CASH REGISTER VALIDATION**

06/09/06 1:04PM 000840330 0008

INTENDED USE

DOMESTIC: _____

#Homes Served _____

WATER SYSTEM WELL: _____

Name of Water System _____

IRRIGATION _____

COMMERCIAL/INDUSTRIAL _____

MONITORING: _____

GRDWTR _____ VADOSE _____

OTHER: _____ (SPECIFY)

WITHIN WATER DISTRICT SERVICE AREA _____ NO _____ YES NAME: _____ (FORM HSA-579-REQUIRED)

CONSTRUCTION DEPTH (FT.) _____ DIAMETER (IN.) _____ DEPTH OF SEAL (FT.) _____ WIDTH OF SEAL (IN.) _____**EXISTING WELLS ON PROPERTY:**

1. OTHER WELLS ON PROPERTY: NUMBER: _____ TYPES: DOMESTIC _____ IRRIGATION _____ COMMERCIAL USE _____ OTHER _____

2. CONDITION OF OTHER WELLS ON PROPERTY: IN USE _____ TO BE DESTROYED _____

3. IF NEW WELL REPLACES AN EXISTING WELL, INDICATE INTENTIONS FOR USE OF REPLACED WELL:

_____ TO SUPPLEMENT NEW WELL _____ TO BE DESTROYED _____ OTHER _____

WELL DESTRUCTION: DEPTH OF WELL 16.5 DEPTH OF SEAL: 5 NUMBER OF WATER FORMATIONS PENETRATED 1

CLEANING OF WELL REQUIRED YES: _____ NO: _____ SEALING MATERIAL _____

PLOT PLAN: ATTACH 2 COPIES OF PLOT PLAN (SEE REVERSE FOR REQUIREMENTS)

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PROPERTY OWNER [Signature] DRILLING CONTRACTOR [Signature] 5/26/06**FOR OFFICE USE ONLY:**ENVIRONMENTAL ASSESSMENT REQUIRED YES _____ NO ☒METER REQUIRED YES _____ NO ☒ METER INSTALLED _____ DATE _____ READING _____

DATE _____ EHS SPECIALIST _____ ANNULAR WELL SEAL WITNESSED:

SITE INSPECTION 6/13/06 [Signature] _____ YES DATE _____APPLICATION APPROVAL 6/13/06 [Signature] _____ NO DEPTH _____

PAD INSPECTION _____ SEAL MATERIAL _____

RECEIPT OF WELL LOG _____ # SACKS CEMENT/YARD _____

FINAL _____

COMMENTS: _____

DISTRIBUTION: WHITE - EHS /YELLOW - WELL DRILLER /PINK - FISCAL CONTROL /GOLDENROD - RECEIPT

Well Permit Application - PHD-133.WPD (REV. 9/03)

APPLICATION FOR WELL PERMIT

☐ NEW ☐ REPLACEMENT ☐ SUPPLEMENTAL ☒ DESTRUCTION ☐ OTHER ☐ MONITORING WELL

010-051-46 (ASSESSOR'S PARCEL NUMBER) 27,968 sq.ft. (PARCEL SIZE) 010-100 (PERMIT #) (ENVISION #) 2381 PROGRAM ELEMENT
 SITE ADDRESS 404 Soguel Avenue, Santa Cruz, CA 95060
 OWNER Chevron-Mark Lafferty ADDRESS P.O. Box 6012, San Ramon CA 94583
 DRILLING CONTRACTOR Cascade Drilling LICENSE # 717510 PHONE (916) 638-1169
 DIRECTIONS TO SITE SE corner of Soguel Ave. and Ocean St. Santa Cruz, CA 95060

DESIGN SPECIFICATIONS:**CASH REGISTER VALIDATION****INTENDED USE**DOMESTIC: ☐

#Homes Served _____

WATER SYSTEM WELL: ☐

Name of Water System _____

IRRIGATION ☐COMMERCIAL/INDUSTRIAL ☐MONITORING: ☐GRDWTR ☐ VADOSE ☐

OTHER: _____ (SPECIFY)

WITHIN WATER DISTRICT SERVICE AREA ☐ NO ☐ YES NAME: _____

(FORM HSA-579-REQUIRED)

CONSTRUCTION DEPTH (FT.) _____ DIAMETER (IN.) _____ DEPTH OF SEAL (FT.) _____ WIDTH OF SEAL (IN.) _____

EXISTING WELLS ON PROPERTY:

1. OTHER WELLS ON PROPERTY: NUMBER: _____ TYPES: DOMESTIC ☐ IRRIGATION ☐ COMMERCIAL USE ☐ OTHER ☐
2. CONDITION OF OTHER WELLS ON PROPERTY: IN USE ☐ TO BE DESTROYED ☐
3. IF NEW WELL REPLACES AN EXISTING WELL, INDICATE INTENTIONS FOR USE OF REPLACED WELL:
☐ TO SUPPLEMENT NEW WELL ☐ TO BE DESTROYED ☐ OTHER _____

WELL DESTRUCTION:

DEPTH OF WELL 16 DEPTH OF SEAL: 5 NUMBER OF WATER FORMATIONS PENETRATED 1
 CLEANING OF WELL REQUIRED YES: ☐ NO: ☐ SEALING MATERIAL _____

PLOT PLAN: ATTACH 2 COPIES OF PLOT PLAN (SEE REVERSE FOR REQUIREMENTS)

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INSURANCE CARRIER Insurance Co. of State of Pennsylvania POLICY # WC 4767870

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PROPERTY OWNER _____

DRILLING CONTRACTOR _____

5/26/06

FOR OFFICE USE ONLY:ENVIRONMENTAL ASSESSMENT REQUIRED YES ☐ NO ☒METER REQUIRED YES ☐ NO ☒

METER INSTALLED _____

DATE _____

READING _____

SITE INSPECTION _____

DATE _____

EHS SPECIALIST _____

ANNULAR WELL SEAL WITNESSED:

APPLICATION APPROVAL _____

DATE _____

YES DATE _____

PAD INSPECTION _____

DATE _____

NO DEPTH _____

RECEIPT OF WELL LOG _____

DATE _____

SEAL MATERIAL _____

FINAL _____

DATE _____

SACKS CEMENT/YARD _____

COMMENTS: _____

DISTRIBUTION: WHITE - EHS /YELLOW - WELL DRILLER /PINK - FISCAL CONTROL /GOLDENROD - RECEIPT

Well Permit Application - PHD-133.WPD (REV. 9/03)

ATTACHMENT B
CITY OF SANTA CRUZ STREET OPENING PERMIT



**Public Works Department
STREET OPENING PERMIT**

Date: 06/13/2006

Permit Number: SP-20060092

Notice of Intention is hereby given that the undersigned will construct on or about
06/15/2006 a Other utility at Ocean at Soquel between Soquel and Broadway in
the City of Santa Cruz for the purpose of:

³ DKM/SAIC 6/13/06
Destroy ~~2~~ monitoring wells - permanent paving one week after by
RRM/Johnson under separate permit

Contractor License Number:
Contractor Name:
Contractor Phone Number:
Traffic Control Plan Required?:

71750
Cascade Drilling Inc
916 638 1169
YES

REQUIREMENTS:

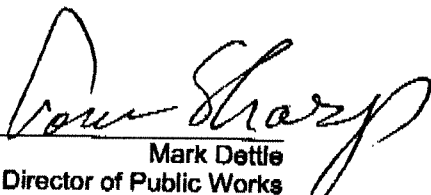
1. Contractor must notify the Public Works Department 24 hours before work is started at (831) 420-5160
2. Work to be completed within 30 days of the Start Date listed above.
3. Street and/or sidewalk to be permanently repaired within seven days of installation.

DISCLAIMER:

Contractor hereby agrees to defend and indemnify the City of Santa Cruz for any and all claims and liability arising from work performed pursuant to this permit


(Contractor Signature)

FOR CASCADE
DRILLING

By: 
Mark Dettie
Director of Public Works

Inspected by:

Inspected Date:

General Provisions

1. Definition: This permit is issued pursuant to Section 15.08.30, 15.08.040 and 15.28.010 of the City of Santa Cruz Municipal Code. The term "encroachment" is used in this permit as defined in said sections of said Code, except as otherwise provided for public agencies and franchise holders. This permit is revocable on five days notice.

2. Acceptance of Provisions: It is understood and agreed by the permittee that the doing of any work under this permit shall constitute an acceptance of the provisions.

3. No precedent established: This permit is granted with the understanding that this action is not to be considered as establishing any precedent on the question of the expediency permitting certain kinds of construction to be permitted within the public right-of-way.

4. Notice prior to starting work: Before starting work, the permittee shall notify the Director of Public Works or other designated employee. Such notice shall be given at least 48 hours in advance of the date work is to begin. Unless otherwise specified, all work shall be performed on weekdays and during normal working hours of the grantor's inspector.

5. Keep permit on work: The permit shall be kept at the site of the work and must be shown to any representative of the grantor or any law enforcement officer on demand.

6. Permits from other agencies: The party or parties to whom this permit is issued shall, whenever the same is required by law, secure the written order of consent of any work hereunder from the Public Utilities Commission of the State of California or any other public board having jurisdiction and this permit shall be suspended in operation until such order of consent is obtained.

7. Protection of traffic: Adequate provisions shall be made for the protection of the traveling public. Barricades shall be placed with amber lights at night. Flagmen shall be present to direct traffic through construction area. All of this may be required by the grantor for the particular work in progress. Warning signs, lights and devices shall be placed in conformance with the requirements of the State of California Department of Transportation Uniform Manual of Traffic Control Devices.

8. Minimum interference with traffic: All work shall be planned and carried out so that there will be the least possible inconvenience to the traveling public except for the specific work permitted. One lane shall remain open to the traveling public at all times. Road closures are not allowed, except with special permission from the Director of Public Works.

9. Storage of material: No material shall be stored within two feet of the edge of the pavement or traveled way or within the shoulder line where the shoulders are wider than five feet. No supplies or equipment shall be stored on the highway until permittee is ready to start work.

10. Cleanup right-of-way: Upon completion of the work, all brush, timber, scrap, and material shall be entirely removed and the right-of-way left in as presentable condition as before work started.

11. Responsibility to protect existing improvements: The permittee shall be responsible for protecting and preserving existing street improvements in or adjacent to the area permitted for construction. Said improvements include but are not limited to streetlights, traffic signals, fire hydrants etc. The permittee shall repair or replace any street improvements damaged while permitted to work in construction area to the satisfaction of the Director of Public Works.

12. Liability for damages: The permittee is responsible and liable for personal injury or property damage which may arise out of the work herein permitted or which may arise out of failure on permittee's part to perform his obligation under this permit in respect to maintenance. If any claim for such injury or damage is made against the City of Santa Cruz or any department, officer, or employee thereof, permittee shall defend, indemnify and hold them and each of the harmless from such claim.

13. Care of drainage: If the work herein contemplated shall interfere with established drainage, ample provision shall be made by the permittee to provide for it as may be directed by the grantor.

14. Test results: Upon demand, the permittee shall provide the Director of Public Works with the results of tests showing that the compaction requirements have been complied with. Compliance shall be certified by a materials testing laboratory with local experience and said laboratory shall be acceptable to the Director of Public Works.

15. Pavement replacement: Any paved portion of County highway which is removed or damaged shall be replaced with minimum replacement of 0.67 foot of Class II aggregate base and 0.25 foot of Type B asphalt concrete. Where the existing structural section is greater than the replacement requirement, the structural section removed shall be replaced in kind. Concrete Streets shall be replaced in kind. Prior to repaving the existing pavement shall be cut on a straight line to give a vertical face to pave against.

16. Damages to roads: Permittee agrees to repair in a manner satisfactory to the City of Santa Cruz any damages to the roads in the project area resulting from this work.

17. All construction shall conform to the current edition standard plans and specifications of the City of Santa Cruz. In case of conflict, the conditions of this permit will take precedence over the standard specifications.

18. Trench Safety has not been checked and is NOT IMPLIED with this permit. For current Codes and Regulations contact: CAL/OSHA (408) 452-7288 and for utility locations contact: USA 1-800-227-2600.

19. If the provisions of this permit are not complied with the City reserves the right to do any and all work necessary to bring the road into a safe condition. The costs of this work will be charged to the permittee. The City will give reasonable notice of its intentions to make such repairs.

Best Management Practices

In order to reduce the amount of pollutants reaching the storm drain system and local waterways, the City developed "Best Management Practices (BMPs)" for various types of construction work. All contractors obtaining a Street Opening or Concrete Permit from the City of Santa Cruz Public Works Department must abide by the BMPs listed below, in addition to complying with the City Municipal Code and any other conditions or requirements placed on a project by the City Planning or Public Works Departments. In the City of Santa Cruz, the storm drain system includes our streets, gutters, storm drain inlets and catch basins, drainage ditches, creeks, and the San Lorenzo River.

General

- The discharge of pollutants or runoff carrying pollutants, including sediment, to the storm drain system is prohibited. Take measures to contain work materials and protect nearby catch basins or gutters if necessary.
- Clean up leaks, drips, and spills immediately. Use dry cleanup methods if possible.
- Material stockpiles must be located away from gutters, storm drain inlets, and water bodies.
- Cover piles of construction materials and wastes with plastic sheeting or tarps so that wind or rain will not carry them into the street or storm drain. Open bags of materials should also be covered or contained.
- Remove and clean up material stockpiles by the end of each day. Sweep up or collect unused materials and debris that remain on pavement, such as the sidewalk, driveway, or street, and dispose of properly.
- When the job is completed, collect all unused or waste materials and dispose of properly. Never leave or abandon materials onsite. Ensure that nothing has "drifted" towards the street, gutter, or catch basin.
- Train your employees on these BMPs and familiarize them with storm water issues prior to beginning work. Ensure that your subcontractors also abide by the BMPs.

Roadwork and Paving

- The discharge of saw cut slurry to the storm drain system is prohibited. Take measures to contain the slurry and protect nearby catch basins or gutters if necessary. If slurry enters the storm drain system, remove the material immediately.
- Dried saw cut slurry must be cleaned up and properly disposed so that it will not be carried into the storm drain system by wind, traffic, or rainfall.
- After breaking up old pavement, sweep up materials and recycle as much material as possible. Properly dispose of non-recyclable materials.
- Cover and seal nearby storm drain inlets and manholes before applying seal coat, slurry seal, etc. Leave covers in place until the oil sealant is dry or the end of the day.
- Park paving machines over drip pans or absorbent materials if they have a continuous drip or leak.
- Groundwater and accumulated rainwater from trench or excavation work may be discharged into the City's sanitary sewer system provided that certain conditions and pollutant levels are met. Discharge into the storm drain system is prohibited unless prior approval has been obtained from the Regional Water Quality Control Board and the City Public Works Department. Please call the Public Works Department, at (831) 420-5131 or 420-5428, for more information.
- The accumulated sediment removed from a dewatering pump or device must be disposed of properly.

Concrete Work

- Concrete and cement may never be discharged into or allowed to reach the storm drain system.
- Do not mix concrete or cement mortar in a gutter, over a storm drain inlet, or immediately adjacent to a water body.
- Never wash or rinse mixing containers and tools into the street, gutter, or storm drain system.
- Wash out from concrete mixers may never be disposed of into the storm drain system.

For more information about these Best Management Practices or for a copy of the brochure on Best Management Practices for Construction Work, please call the Public Works Department at (831) 420-5131.

Revised June 4, 2003

NOTICE TO CONTRACTORS REGARDING REFUSE AND DEBRIS HAULING

If you need services to haul construction debris or refuse from your project, you are required by the City of Santa Cruz Municipal Code, Chapter 6.12, to use the City's Refuse Collection Program.

Private companies are not allowed to operate refuse/debris box services within the City limits, except under certain limited circumstances (see Santa Cruz Municipal Code section 6.12.160). Any questions regarding this provision may be directed to Bob Nelson, Superintendent of Solid Waste, 420-5548.

For City collection services and rates, call 420-5220 or contact Utility Customer Services, City Hall Annex, 800 Center Street, Room 101.